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CONFIRMATION NO. 7398

<b>SERIAL NUMBER</b> 10/779,297	<b>FILING OR 371(c) DATE</b> 02/12/2004 <b>RULE</b>	<b>CLASS</b> 433	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> IVe01US
<b>APPLICANTS</b> Frank R. Lauciello, Elma, NY; Michael Thomas Kirkpatrick, Amherst, NY;				
** CONTINUING DATA ***** <i>none clo</i>				
** FOREIGN APPLICATIONS ***** <i>none clo</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 05/12/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 8
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Carlyle D. O'Connell</i> Examiner's Signature Initials		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> John C. Thompson 69 Grayton Road Tonawanda, NY14150				
<b>TITLE</b> Method and apparatus for selecting denture teeth				
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	